



**COMBINED DECLARATION AND
POWER OF ATTORNEY FOR UTILITY
PATENT APPLICATION
(37 C.F.R. 1.63)**

		Attorney Docket No.	B829.312-0001
		First Named Inventor	Bruno Bleines
		COMPLETE IF KNOWN	
		Application Number	10/577,499
Declaration Submitted with Initial Filing	<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 C.F.R. 1.16(e)) Required)	Filing Date	April 28, 2006
		Group Art Unit	
		Examiner Name	

As a below named inventor, I hereby declare that my residence, post office address, and citizenship are as stated below.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:
HEALTH MONITORING SYSTEM IMPLEMENTING MEDICAL DIAGNOSIS

the specification of which:

is attached hereto OR

☒ was filed on **April 28, 2006** as United States Application Number **10/577,499**, which is the national phase of PCT International Application Number **PCT/FR2004/050556** filed on **November 2, 2004**.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

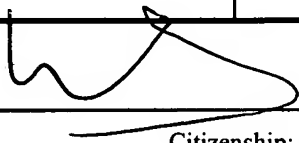
POWER OF ATTORNEY

As a named inventor, I hereby appoint the registered practitioners associated with Customer Number **00164** to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

DIRECT ALL CORRESPONDENCE TO:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Sole or First Inventor:			
Given Name (First and middle (if any))		Family Name or Surname	
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